COUNTY OF LOS ANGELES DEPARTMENT OF MENTAL HEALTH

POSTAGE STAMP LOG CUSTODIAN'S DESK

| Facility | |
|------------------|--|
| Cost Center Code | |

| DATE | ISSUED | | JUSTIFICATION FOR | | | INVENTORY BALANCE | | | | | GROSS | REC/VER | |
|------|--------|----|-------------------|----|-----|-------------------|--|--|--|--|-------|---------|----------|
| | BY | то | ISSUANCE/COMMENTS | IN | OUT | .37 | | | | | TOTAL | BY | DATE |
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Number of Stamps issued to client is Subtracted. Number of Stamps transferred from Safe File is Added. Other Stamps Specify Stamp value.